

HAWAII STATE ETHICS, COMMISSION

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LOBBYIST REGISTRATION FORM TATE OF HAWAII (Type of Brief Clorely) STATE ETHICS COMMISSION

(Type or Print Clearly) PART I LOBBYIST NAME (Last) (First) (Middle) **TELEPHONE** Slovin М 539-0834 Gary MAILING ADDRESS (Street) FAX 533-4945 1099 Alakea Street, Suite 1400 **EMAIL** gslovin@awlaw.com (City) (State) (Zip Code) Honolulu H! 96813 EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) **TELEPHONE** Slovin & Ito, LLP 539-0400 MAILING ADDRESS (Street) FAX 533-4945 1099 Alakea Street, Suite 1400 **EMAIL** (City) (Zip Code) (State) 96813 Honolulu HI

PART II ORGANIZATIO	ON	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) MultiState Associates Inc. on behalf of American Fair Credit Council		TELEPHONE 703-684-1110
EMAIL		
(City)	(State)	(Zip Code)
Alexandria	VA	22314
NAME OF PERSON RESPONSIBL	TELEPHONE	
Carrie E. Castro		703-684-1110
MAILING ADDRESS (Street)		FAX 703-684-7912
515 King Street, Suite 300		EMAIL ccastro@multistate.com
(City)	(State)	(Zip Code)
Alexandria	VA	22314

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PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY					
☐ Agriculture	☐ Education	Human Services	Science, Technology & Economic Development		
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	☐ Tourism & Recreation		
Consumer Protection & Commerce	Hawaiian Affairs	☐ Labor & Employment	☐ Transportation		
Culture, Arts, Historic Preservation	☐ Health	Planning, Land & Water Use Management	Other: (indicate below)		
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections			
PART IV CERTIFICATION OF LOBBYIST					
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.					
1/25/2013					
(Signature of Lobbyist) (Date)					
PART V AUTHORIZATION TO LOBBY					
NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
Paul W. Hallman	President, MultiState Associates, Inc.				
NAME OF ORGANIZATION (if a	ppiicable) TELEPHONE				
MultiState Associates Inc. on behalf of American Fair Credit Council			703-684-1110		
MAILING ADDRESS (Street)			FAX 703-684-7912		
515 King Street, Suite 300		,	EMAIL ccastro@multistate.com		
(City)	(State)		(Zip Code)		
Alexandria	VA	22314			
I hereby authorize the apove - named person to engage in lobbying activities on behalf of the undersigned.					
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(Signature of Authorizing Officer or Person Represented)

(Date)